CLAIMS ONLY

Application Number	Filing Date
10788802	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1	1						51						
2	1						52						
3	1						53						
4	1						54						
5	1						55						
6		1					56						
7		1					57						
8		1					58						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep	5						Total Indep						
Total Depend	6						Total Depend						
Total Claims	11						Total Claims						